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Application Number	10/090,268
Filing Date	03/04/2002
First Named Inventor	Robert Wyckoff
Art Unit	3743
Examiner Name	Andrea M. Raqonese
Attorney Docket Number	(NEW DOCKET #) 1521.2

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name Robert L. Wyckoff

Signature

Date

Telephone

1-770-241-7067

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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